

**PATENT NUMBER**

**O.J.P.E.**

**PATENT DATE**

APPLICANTS	APPLICATION NO.	CONT/PRIOR	CLASS	SUBCLASS	ART-UNIT	EXAMINER
	09/774516	D	623	122	3738	Isabella
TITLE	Bioresorbable stent					
had parent 09/324,743						
APPLICANT(S):						

PTO-2040  
12/99

ISSUING CLASSIFICATION												
ORIGINAL				CROSS REFERENCE(S)								
CLASS		SUBCLASS		CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)							
INTERNATIONAL CLASSIFICATION												

☐ Continued on Issue Slip Inside File Jacket

<input type="checkbox"/> <b>TERMINAL DISCLAIMER</b>	<b>DRAWINGS</b>			<b>CLAIMS ALLOWED</b>	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)			<b>NOTICE OF ALLOWANCE MAILED</b>	
<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____ _____ _____	_____ (Primary Examiner) (Date)			<b>ISSUE FEE</b>	
				Amount Due	Date Paid
<input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.	_____ (Legal Instruments Examiner) (Date)			<b>ISSUE BATCH NUMBER</b>	
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